Scattergood 1

PTO/SB/01 (10-01)

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Att rney D ck t Numb r

DECLARATION FOR UTILITY OR	Att mey b ck thun	IID Commission .	10/6
DESIGN	First Nam d Invent	John R. Sc	attergood 10/658250
PATENT APPLICATION	COMPLETE IF KNOWN		
(37 CFR 1.63)	Application Number		
Declaration Declaration	Filing Date		
Submitted OR Submitted after Initial with Initial Filing (surcharge	Art Unit		
Filing (37 CFR 1.16 (e)) required)	Examiner Name		
As the below named inventor, I hereby declare that:			
My residence, mailing address, and citizenship are as stated be	low next to my name.		
I believe I am the original and first inventor of the subject matter	which is claimed and for which	ch a patent is sought o	on the invention entitled:
Atomization Technique for Producing	g Fine Particles		
(Title of the	Invention)	Ŷ.	
the specification of which	,		
is attached hereto			
OR			ŀ
was filed on (MM/DD/YYYY)	as United States A	pplication Number or	PCT International
Application Number and was amend	ded on (MM/DD/YYYY)		(if applicable).
I hereby state that I have reviewed and understand the contents any amendment specifically referred to above.	of the above identified speci	fication, including the	claims, as amended by
I acknowledge the duty to disclose information which is material applications, material information which became available betwe international filing date of the continuation-in-part application.	to patentability as defined in en the filing date of the prior	37 CFR 1.56, includir application and the na	ng for continuation-in-part ational or PCT
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(c breeder's rights certificate(s), or 365(a) of any PCT internations States of America, listed below and have also identified below, breeder's rights certificate(s), or any PCT international applicational claimed.	al application which designate by checking the box, any fo	ted at least one cour reign application for	ntry other than the United patent, inventor's or plant
Prior Foreign Application Number(s) Country	Foreign Filing Date (MM/DD/YYYY)	Priority C Not Claimed	ertified Copy Attached? YES NO
Additional foreign application numbers are listed on a supp	lemental priority data sheet F	PTO/SB/02B attached	hereto:

[Page 1 of 2]

DECLARATION — Utility or D sign Pat nt Application

Direct all correspondence to: Customer Number or Bar Code Label OR Correspondence address below				
Donald E. Hayes, Jr.				
Name				
Address 3097 Wembley Ridge				
city Atlanta		State	GA	30340 zip
USA	404-2 ephone	19-822	28	770-908-8622 Fax
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.				
NAME OF SOLE OR FIRST INVENTOR :	A petition h	as bee	en filed for this unsign	ned inventor
Given Name (first and middle [if any]) John R. Family Name or Surname			d	
Inventor's Signature			09/03/2003 Date	
LaGrange Residence: City	GA State		USA	USA Citizenship
111 Clearwater Drive				
Mailing Address	T 64		30241-1523	LICA
LaGrange	GA State		30241-1523 ZIP	USA Country
NAME OF SECOND INVENTOR:	A petition has	s been	filed for this unsigne	·
Given Name (first and middle [if any])		Family or Surr		
inventor's Signature			Date	
Residence: City	State		Country	Citizenship
Mailing Address				
City	State		ZIP	Country
	1:	onal Inve	entor(s) sheet(s) PTO/SB/	<u> </u>

PTO/SB/09 (12-97)
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(37 CFR 1.9(f) & 1.27(b))INDEPE		Docket Number (Optional) Scattergood 1
Applicant, Patentee, or Identifier: John	n R. Scattergood	
Application or Patent No.: N/A		
Filedorlssued: herewith		
Title: Atomization Technique	for Producing Fine Particles	
As a below named inventor, I hereby sta for purposes of paying reduced fees to the	nte that I qualify as an independent invent ne Patent and Trademark Office describe	or as defined in 37 CFR 1.9(c)
the specification filed herewith w	ith title as listed above.	
the application identified above.		
the patent identified above.		
grant, convey, or license, any rights in the under 37 CFR 1.9(c) if that person had a	or licensed, and am under no obligation einvention to any person who would not qu made the invention, or to any concern wh or a nonprofit organization under 37 CFR	alify as an independent inventor iich would not qualify as a small
Each person, concern, or organization to obligation under contract or law to assign	o which I have assigned, granted, conve n, grant, convey, or license any rights in	yed, or licensed or am under an the invention is listed below:
No such person, concern, or or	ganization exists.	
Each such person, concern, or	organization is listed below.	
stating their status as small entities. (37 I acknowledge the duty to file, in this appendithment to small entity status prior	each named person, concern, or organizate CFR 1.27) Dication or patent, notification of any char to paying, or at the time of paying, the earlich status as a small entity is no longer	nge in status resulting in loss of earliest of the issue fee or any
John R. Scattergood NAME OF INVENTOR NAME NAM	ME OF INVENTOR	NAME OF INVENTOR
	nature of inventor	Signature of inventor
Date Date Date	e	Date

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

PTO/SB/81 (02-01)

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POWER OF ATTORNEY OR **AUTHORIZATION OF AGENT**

Application Number	
Filing Date	
First Named Inventor	John R. Scattergood
Title	Atomization Technique for Producin
Group Art Unit	
Examiner Name	
Attorney Docket Number	Scattergood 1

Practitioners at Customer Number OR ✓ Practitioner(s) named below: Name Registration Number Donald E. Hayes, Jr. Donald E. Hayes, Jr. Please change the correspondence address for the above-identified application to: The above-mentioned Customer Number. OR Practitioners at Customer Number. Please change the correspondence address for the above-identified application to: The above-mentioned Customer Number. OR Practitioners at Customer Number. Please change the correspondence address for the above-identified application to: The above-mentioned Customer Number. OR Practitioners at Customer Number. Pleac Customer Number Bar Code Label here Place Customer Number Bar Code Label here Number Bar Code Label here Number Bar Code Label here					
Name Registration Number Donald E. Haves , Jr. 33,245 as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith. Please change the correspondence address for the above-identified application to: The above-mentioned Customer Number. Place Customer Number. Place Customer Number Bar Code Label here Firm or Individual Name Address Address Address Address Address Address Telephone 404-219-8228 Fax 770-908-8622 I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTOISB/96). SIGNATURE of Applicant or Assignee of Record Name Signature Date September 4, 2003 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.	OR			Number Bar Code	
Donald E. Hayes, Jr. 33,245 as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith. Please change the correspondence address for the above-identified application to: The above-mentioned Customer Number. OR Practitioners at Customer Number. Place Customer Number			T	Registration Number	
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The above-mentioned Customer Number. OR Practitioners at Customer Number Donald E. Hayes, Jr. Address Address Address Address Address Address Address Address Atlanta State GA Zip 30340 Country USA Telephone 404-219-8228 Fax 770-908-8622 I am the: ✓ Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). SIGNATURE of Applicant or Assignee of Record Name Signature Date September 4, 2003 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.					
Practitioners at Customer Number Practitioners at Customer Number Place Customer Number Bar Code Label here Donald E. Hayes, Jr. Address Address Address Address Address Address City Atlanta State GA Zip 30340 Country USA Telephone 404-219-8228 Fax 770-908-8622 I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). SIGNATURE of Applicant or Assignee of Record Name Signature Date September 4, 2003 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.	Please change the corre	espondence address for the above-ide	entified	application to:	
Practitioners at Customer Number OR Donald E. Hayes, Jr. Address Address Address Address Address City Atlanta State GA Zip 30340 Country USA Telephone 404-219-8228 Fax 770-908-8622 I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). SIGNATURE of Applicant or Assignee of Record Name Signature Date September 4, 2003 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.	The above-mention	ned Customer Number.			
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Address Address Address Address State GA Zip 30340 Country USA Telephone 404-219-8228 Fax 770-908-8622 I am the: Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). SIGNATURE of Applicant or Assignee of Record Name Signature Date September 4, 2003 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.		stomer Number]		
Address Address Address Address Signature Donald E. Hayes, Jr. Donald E. Hayes, Jr. Address 3097 Wembley Ridge City Atlanta State GA Zip 30340 Country USA Fax 770-908-8622 I am the: Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). SIGNATURE of Applicant or Assignee of Record Name Signature Date September 4, 2003 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.		1			
Address City Atlanta State GA Zip 30340 Country USA Telephone 404-219-8228 Fax 770-908-8622 I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). SIGNATURE of Applicant or Assignee of Record Name Signature Date September 4, 2003 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.		Donald E. Hayes, Jr.			
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Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). SIGNATURE of Applicant or Assignee of Record Name Signature Date September 4, 2003 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.	Telephone	404-219-8228	Fax 770-908-8622		
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Signature Date September 4, 2003 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.	✓ Applicant/Invent	or.			
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Name Signature Date September 4, 2003 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.	Statement under	r 37 CFK 3.73(D) is enclosed. (Form I	TUISB	190).	
Signature Date September 4, 2003 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.	A C D' C. BOX OF TAXABLE P. BOX. Security 1.4 (Security)	The state of the s	nee of	Record	
Signature Date September 4, 2003 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.	Name //ol	hun R. Scatter good			
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		rms are submitted.			

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